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Rochelle K. Seide, Ph.D. (Reg. #32,300) (Depositor's name)
Rochelle K. Seide (Signature)
7/20/04 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/955,877	09/19/2001	Said I.A. Shalaby	AP32738; 066876.0103	9851

TITLE OF INVENTION: HERBAL COMPOSITIONS AND TREATMENT METHODS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	07/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PATTEN, PATRICIA A	1654	424-764000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Baker Botts L.L.P.

2 _____

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ZEYAD TECHNOLOGIES LLC

103 Alpine Road
 Yonkers, NY 10710

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-4377 (enclose an extra copy of this form).

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Rochelle K. Seide, Ph.D. (Reg. # 32,300)

(Authorized Signature)

(Date)

Rochelle K. Seide7/20/04

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01 FC:2501
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